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Application Number	09/616,592
Filing Date	07/14/2000
First Named Inventor	David D. Verness
Title	Medical Electrical Lead
Art Unit	3762
Examiner Name	
Attorney Docket Number	P0004824.06

I hereby revoke all previous powers of attorney given in the above-identified application.

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27581

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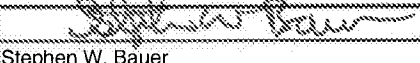
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	February 16, 2010
Name	Stephen W. Bauer	Telephone	763-526-0339
Title and Company	Sr. Patent Director, Chief Patent Counsel - CRDM		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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